

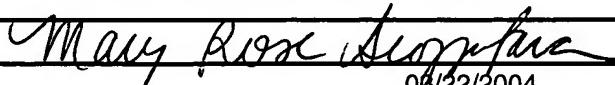
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**TRANSMITTAL  
FORM**

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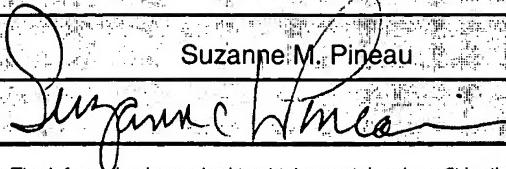
Total Number of Pages in This Submission

Application Number	10/603,224
Filing Date	06/25/2003
First Named Inventor	Thomas S. Murphy et al.
Art Unit	1771
Examiner Name	To Be Assigned
Attorney Docket Number	03317.126US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): - Postcard
<b>Remarks</b> 1. Submission of Formal Drawings 2. PTO Form 1449 (2 pgs.) 3. 38 References		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Mary Rose Scozzafava, Reg. No. 36,268	
Signature		
Date	06/22/2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Suzanne M. Pineau
Signature	
Date	06/22/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Thomas S. Murphy, et al

Serial No. 10/603,224

Examiner: TBA

Filed: June 25, 2003

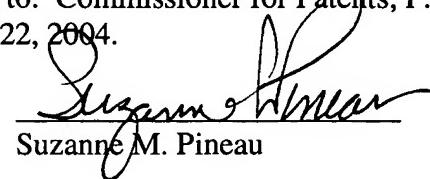
Group Art Unit: 1771

For: **Pressure-Sensitive Adhesive Tapes**

Atty Docket No.: 03317.126 US1

**CERTIFICATE UNDER 37 CFR 1.8(a)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on March 22, 2004.



Suzanne M. Pineau

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**SUBMISSION OF FORMAL DRAWINGS**

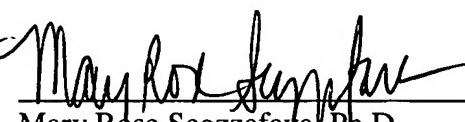
Sir:

Applicants submit herewith 4 sheets of formal drawings, Figures 1 – 4.

No fee is believed to be due in connection with this matter. In the event of a fee deficiency, the Commissioner is hereby authorized to debit any underpayment or credit any overpayment to Deposit Account No. 08-0219.

Respectfully submitted,

Dated: March 22, 2004



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